

ASSISTANT COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, DC 20231

PATENT
Date: November 22, 2000
File No. 0327.63678

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Lih-Feng Tsaor

For: ZERO-OVERHEAD SYMBOL RATE
ADAPTATION SYSTEM FOR OVSF CODE

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Asst. Comm. for Patents, Washington, D.C. 20231, on this date. 7 2023

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Enclosed are:

- (X) 28 pages of specification, including 17 claims and an abstract.
- () an executed oath or declaration, with power of attorney.
- (X) an unexecuted oath or declaration, with power of attorney.
- () _____ sheet(s) of informal drawing(s).
- (X) 12 sheet(s) of formal drawings(s).
- () Assignment(s) of the invention to _____.
- () Assignment Form Cover Sheet.
- () A check in the amount of \$_____ to cover the fee for recording the assignment(s) is enclosed.
- () Information Disclosure Statement.
- () Form PTO-1449 and cited references.
- () Associate power of attorney.
- () Priority Document.


Fee Calculation For Claims As Filed

a) Basic Fee						\$ 710.00
b) Independent Claims	<u>5</u>	-	3	=	<u>2</u>	x \$ 80.00 = \$ <u>160.00</u>
c) Total Claims	<u>17</u>	-	20	=	<u>0</u>	x \$ 18.00 = \$ <u> </u>
d) Fee for Multiple Claims						\$270.00 = \$ <u> </u>
					Total Filing Fee	\$ <u>770.00</u>

- () A check in the amount of \$_____ to cover the filing fee is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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